PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/583,352			ing Date 20/2007	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b), (\neg	N/A	ED NO	N/A		N/A	TEE (a)	i	N/A	TEE (0)
┢	SEARCH FEF	or (c))	N/A		N/A		N/A		1	N/A	
H	(37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		ł	N/A	
	(37 CFR 1.16(o), (p), (TAL CLAIMS	or (q))	minus 20 =				x \$ =		OR	x s =	
INE	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *				x s =			x s =	
(37	CFR 1.16(h))	If the	If the specification and draw		ne evceed 100	1			ł		
	APPLICATION SIZE (37 CFR 1.18(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	n size fee due							
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		1	TOTAL	
	APPI	SMAL	L ENTITY	OR		ER THAN					
LN:		(Column 1) CLAIMS	HIGH		T .	1 1				r	
	01/11/2008	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ĬΞ	Total (37 CFR 1.16())	· 11	Minus	 20	= 0		x \$ =		OR	X \$50=	0
AMENDMENT	Independent (37 CFR 1.16(h))	• 2	Minus	3	= 0		x \$ =		OR	X \$210=	0
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.1601)		Minus	**	=	i	x \$ =		OR	x s =	
	Independent (37 CFR 1,16(h))	*	Minus	***			x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR		
									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.											

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